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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Attorney Docket No. : ICUMM.11C4C4CC1
Applicant : George A. Lopez
For : FLUID TRANSFER DEVICE AND METHOD
OF USE
Attorney : Paul N. Conover
"Express Mail" Label No. : EV 766655175 US
Date of Deposit : May 26, 2006

EV766655175US

I hereby certify that the accompanying

Transmittal letter; Response; Replacement Drawing; Request for Corrected Filing
Receipt with copies of Filing Receipt and Preliminary Amendment; Check for
Extension Fee; Return Prepaid Postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

A handwritten signature in black ink, appearing to read "Nelson Merida", written over a horizontal line.

Nelson Merida

2624845
052306

San Diego
619-235-8550

San Francisco
415-954-4114

Los Angeles
310-551-3450

Riverside
951-781-9231

San Luis Obispo
805-547-5580

Please Direct All Correspondence to Customer Number **20995****AMENDMENT / RESPONSE TRANSMITTAL**

Applicant : George A. Lopez
App. No : 10/607,946
Filed : June 27, 2003
For : FLUID TRANSFER DEVICE AND
METHOD OF USE
Examiner : Cris L. Rodriguez
Art Unit : 3763

Mail Stop Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Response to Office Action Mailed November 30, 2005 in 9 pages.
- (X) Replacement Drawing in 1 page.
- (X) Request for Corrected Filing Receipt in 1 page with copy of Filing Receipt mailed 9/25/2003 and Preliminary Amendment dated 9/5/2003.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Excess Claims	14 - 16 = 0	1202 (\$50)	0 x 50 =	\$0
Excess Independent	1 - 3 = 0	1201 (\$200)	0 x 200 =	\$0
3 Month Extension	1.17(a)(3)	1253 (\$1,020)		\$1,020
			TOTAL FEE DUE	\$1,020

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$1,020 is enclosed.

Docket No.: ICUMM.11C4C4CC1

May 26, 2006

App. No.: 10/607,946

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- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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2624701:joc
052306